Ohio Campaign Finance Report

Prescribed by Secretary of State 3/05

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Full Name of Committee				BO Registra	hon Number of P	Mis	
Committee to Reta	ın Judge Reece						
Full Name of Candidate							
Guy L. Reece, II							
Street Address			Office Sought	alria Count	District	Common	
Judge, Franklin County Count of Council 100 South Third Street Pleas, Full Term Commencing 1/03/2007							
City				State	Zıp Code		
Columbus				ОН	43215		
					. X	Annual Year	
Type of Report	Pre-Primary	Post-Primary	Pre-General	Post-Ger	neral	2009	
ingertofielleftot Keerlij	July	August	September			Semiannual	
(egy	Monthly	Monthly	Monthly	Termina	tion		
Amended Report?	Report Electronically filed?			М	D	Y	
☐ Yes 🗹 No		res 🗹 No	Pate of Medical				

For candidates only, during an election year if total contributions and expenditures each total \$500 or less during the combined pre- and post-periods at one election, check box No other forms are required at a post-primary or post-general period, if above statement applies See R C 3517 10(H) for details

L. Amsunt brought forward from last report	\$ 6,190.79
A. Total process y contributions (From Form No. 31-43)	\$ 0.00
i. Textoile: incore (Forn Form No. 31-A-2)	\$ 0.00
ion in the second secon	\$ 6,190.79
5. Total monetary experditines (Croin Born No. 21 ID)	\$ 1,400.00
s, Balence or thank (time during time s)	\$ 4,790.79
7. Velizaeffirkind contributous received (From Ferm No. 214.7)	\$ 0.00
2. Velucating and contributous made (from Rome No. 21-4-2)	\$ 0.00
A Constituting force owed by committee (From From No. 1945)	\$ 4,000.00
Wednesdan Addres over by committee (From From 195 1145) 24 4 1	\$ 9,184.40
11. Outstanding loan sowed to committee (From Form No. 31-K)	\$ 0.00
12. Vanis jo lintependentespendingestnate (Brons om No. 31. 4)	\$ 0.00
13 Too Recorded billing Elithdes only Sum of thirds 2.77 and amount of any new homencoewed this period	\$

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TH)	E INFORMATIO	ON CONTAIN	NED IN THIS	S REPORT IS MAD	E UNDER	THE PENALTY	OF ELECTION	LSIFICATION	N. WHOEVER	_	•
CO	MMITS ELECT	ION FALSIF	ICATION IS	GUILTY OF A FEI			, , , , , ,			125	an 10
<u> </u>	<u>urtis A. T</u>	unnen,	<u>ı reasur</u>	er		V	<i>M</i>			1000	- PO
Prin	t Name and Title	(Treasurer and	Deputy Treas	urer only)	Sign	nature	71 . 4	V		Date	;
	Contribution]	Expenditure] 1	Other		Tot	al	
	pages	0		pages	1		pages	3_	page	es	4
			j			j					

Statement of Expenditures

Prescribed by Secretary of State 2/01

Name of Committee in Full			* *							
Committee to Retain Judge Reece				_						
To Whom Paid				М		D	T	Y	Amount	
Franklın County Republican Party		0	3	2 (<u>6 </u>	0 9		1,250 00		
Address	Purpos									
14 E Gay Street		ntribi								
City		State	Zıp Code	Che	ck N	umber				
Columbus	<u> </u>	H	43215			106	<u>U</u>			
To Whom Paid				M		D	_	Y	Amount	450.00
Kıds Votıng Ohio/Central Region	In				8	1 2	4	0 9		150 00
Address	Purpose									
60 E Broad Street, 3rd Floor City			onsorship	CI	.1.30					
Columbus	l o	tate H	Zıp Code 43215	Che	CK IN	umber 106				
To Whom Paid		1 11	43213	-	,		+		A	
10 Whom Paid				M		D	ļ	Y	Amount	
Address	Purpose		*****			Щ.				
Addiess	ruiposi	•								
City	٠.	tate	Zıp Code	Che	ck N	umber				
Chy	l "	I	Zip Code	CIIC	CK IV	ullibei				
To Whom Paid	1			М	r	D	Т.	Y	Amount	
TO WHOM I ME				IV	l	ו ו	ı	i	Amount	
Address	Purpose	3					_			
	l =poo	=								
City	<u> </u>	tate	Zıp Code	Che	ck N	umber				
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To Whom Paid	_		I	М		D	Т	Y	Amount	
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Address	Purpose	:					_		<u> </u>	
	1 .									
City	s	tate	Zıp Code	Che	ck N	umber			T .	
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To Whom Paid	-			М		D	Т	Y	Amount	
						- 1	1		l	
Address	Purpose	;								
	}									
City	S	tate	Zıp Code	Che	ck N	umber				
To Whom Paid				М		D	T	Y	Amount	
							١	1		
Address	Purpose	;						•		
	ĺ									
City	s	tate	Zıp Code	Che	ck N	umber				
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To Whom Paid M D Y Amount										
							1			
Address	Purpose	;		_			_			
City	S	tate	Zıp Code	Che	ck N	umber				
		1								
					_	_	_			

Page Total \$ 1.400.00

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Page	

Statement of Loans Received

Prescribed by Secretary of State3/05

						y social	, 01 1								
Full Name of Committee		_												-	
Committee to Retain J	udge	Reece	9												
From Whom Received									Prior	Amo				incurred this Period	
Guy L. Reece, II											4,0	00.00	_		0.00
Address 7191 Keystone Ranch	Cour	t											Outsta	anding Balance 4,000	0.00
City State Zip Code Loans Received This Period										Pay	ments T	ns Period			
Blacklick		4300			Date			Amount			Date	e		Amount	
Date Loan was acceptant	м 1 0	D 2 5	$\begin{vmatrix} \mathbf{y} \\ 0 \end{vmatrix} 4$	М	D	Y	\$		М		D	Y	\$		
Registration Number, if PAC				М	D	Y			М		D	Y			
Employer/Occupation/Labor Organization*				М	D	Y	T		М		D	Y			
From Whom Received					<u> </u>	.1	-		Prior	Amo	ount		Amt 1	ncurred this Period	
Address						_							Outsta	nding Balance	
City	State	Zıp Code	•	Los	ns Recer	ved This	Period		Т		D-4	•	ments This Period		
Date Loan was originally	3.6	D	Y	M	Date	Y	i e	Amount	- 1		Date		I.	Amount	
INCHES AND	М						\$		М		D 	Y	s		
Registration Number, if PAC				М	D	Y	i		М		D	Y			
Employer/Occupation/Labor Organization*				М	D	Y			М		D I	Y			
From Whom Received				<u> </u>	<u> </u>		<u> </u>		Prior Amount Amt Incurred this Period						
Address													Outsta	nding Balance	
City	State	Zıp Code	;	Loans Received This Period						Payı	nents Tl	us Period			
					Date			Amount			Date	;		Amount	
Date It spiswas originally in the control of the co	M	D	Y	М	D	Y	s		М		D	Y	s		
Registration Number, if PAC				М	D	Y			М		D 	Y			
Employer/Occupation/Labor Organization*				М	D	Y	T		М		D	Y			
						I				1	_		-I		

If a loan is forgiven, write "Forgiven" in the "Outstanding Balance" space Transfer total of all loans received this period to the Statement of Other Income (Form No 31-A-2) Transfer total of all payments made in this period to the Statement of Expenditures (Form No 31-B) Transfer Total Outstanding Balance to the cover page (Form No 30-A)

1	Total prior amount \$	4,000 00	
2	Total received this period \$	0.00	(To Form No 31-A-2)
3	Total Payments this Period \$	0.00	(also record on Form 31-B
4	Total Outstanding Balance \$	4,000 00	(To Form No 30-A)

^{*} Required for contributions over \$100 to statewide and general assembly candidates. If contributor is self-employed, occupation and the name of the individual's business, if any, rather than employer should be listed. If two ormore employees donate via payroll deduction and exceed the aggregate of \$100, the labor organization of which the employees are members, if any, must appear R C 3517 10(B)(4)

Statement of Outstanding Debts

Prescribed by Secretary of State 2/01

Full Name of Committee													
Committee to Retain Judge Reece				Рпог Ап	4		IA-4 TIdDI						
				PHOT AI		24.40	Amt Incurred this Period						
Guy L. Reece, II Address				Itam or E	9,10 Purpose fo	34.40	0 00 Outstanding Balance						
							1						
7191 Keystone Ranch Court	I	7 - C-1-		300a	s & S	ervice	9,184.40						
Blacklick	State Zip Code OH 43004						Payments Made This Period Date Amount						
Male Debt was uniginally insurred	M 	D	Y	M 	D	Y	\$						
Registration Number, if PAC	<u> </u>			M	D	Y							
				M	D	Y							
To Whom Owed				Prior An	nount		Amt Incurred this Period						
Address				Item or P	urpose fo	r Debt	Outstanding Balance						
City	State	Zip Code			Pa Date	yments N	Made This Period Amount						
Date (1989) avis originally Inquired	M	D	Y	М	D	Y	\$						
Registration Number, if PAC				М	D 	Y							
				М	D	Y	-						
To Whom Öwed				Рпот Ап	nount		Amt Incurred this Period						
Address				Item or P	urpose for	Debt	Outstanding Balance						
City	State 2	Zip Code		Payments Made This Period Date Amount									
Date Debt was originally in urred	M	D	Y	M	D	Y	S						
Registration Number, if PAC		•		M	D	Y							
				M	D	Y							

If a debt is forgiven, write "Forgiven" in the "Outstanding Balance" column Transfer total of all payments made this period to the Statement of Expenditures (Form No 31-B) Total amount forgiven should be included in the In-Kind Contributions Received (Form No 31-J-1) Transfer total outstanding debt amount to the cover page

Total Payments this Period \$	0.00	(also record on Form 31-B)
Total Outstanding Balance \$	9,184.40	(also record on cover page)